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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875									Application or Docket Number		
CLAIMS AS FILED — PART I (Column 1) (Column 2)							SMALL E	ENTITY	OR	OTHEF SMALL	R THAN ENTITY
FOR NUMBER FILED NUMBER			ER EXTRA	1	RATE	FEE		RATE	FEE		
	IC FEE CFR 1.16(a))					1		3	OR		s
TOT	AL CLAIMS CFR 1.16(c))	·	minus 20	minus 20 = °		1	X \$ =		OR	X \$ =	
INDEPENDENT CLAIMS (37 CFR 1.16(b))		4S	minus 3			ĺ	X \$ =		OR	X 8 =	
MULTIPLE DEPENDENT CLADM PRESENT (37 CFR 1.16(d))							+; =		OR	+; =	
" If the difference in column 1 is less than zero, enter "0" in column 2.						•	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II											
10	2-1504	(Column 1)		(Column 2)	(Calumn 3)	_	SMALL E	YTITM	OR	OTHER SMALL	
NT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
AMENDMENT	Total (37 CFR 1.18(d)	. 20	Minus	- 3 0	=		x s=		OR	x s=	
	independent (37 CFR 1.16(b))	\ <u>\</u>	Minus	<u> </u>	-		x s=		OR	X \$=	
Ą	FIRST PRESENT.	ATION OF MULTIPLE	E DEPENDE	ENT CLAIM (37 CF	R 1.16(d))		+5_=	_	OR	+5=	
					•	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
	121115	(Column 1)		(Cotumn 2)	(Column 3)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			,	
AMENDMENT B	1	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.10(d)	·//	Minus	30	•		X S =		OR	x s=	7
	independent (37 CFR 1.16(b))	.5	Minus	" 5	=		x s=		OR	X \$ =	
AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+5		OR	+ 5 =	
							TOTAL ADD'L FEE		OR	TOTAL ADO'L FEE	
		(Column 1)		(Column 2)	(Column 3)		·			•	
MENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE ·	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total (37 CFR 1.18(c))	•	Minus	**	•		x s=		OR	x s=	
	Independent (37 CFR 1.16(b))	•	Minus	•••	-		x s=		OR	x s=	
ΑÑ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+5 ==		OR	+ 5 =	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE			
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".											

"If the "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.